

EDITORIAL NOTES:

- (1) The same questions were asked of both the private farmer applicators and the commercial applicators.
- (2) The following section was designed for a commercial pesticide applicator. However, the same questions were asked of the farmer and his spouse. For example, the first question for the farmer was "Did you ever have a job off a farm?"
- (3) In question 5, we suggest permitting the subject to give a numerical answer. You could then determine suitable ranges based on the distribution of responses.

II. Work Practices - Occupational History Information

1. Did you ever have a job other than as a commercial pesticide applicator?

☐ No [GO TO THE NEXT SECTION] ☐ Yes

2. For the job you held the longest (other than as a commercial pesticide applicator), what was your job?

3. What industry was this job in? (For example: Building/home construction, trucking, grain milling, restaurant)

4. For the job you held the longest (other than as a commercial pesticide applicator), which of the following were you exposed to? (*Mark all that apply*)

<input type="checkbox"/> Pesticides	<input type="checkbox"/> Grain dust	<input type="checkbox"/> Engine exhaust	<input type="checkbox"/> Mercury
<input type="checkbox"/> Solvents (other than gasoline)	<input type="checkbox"/> Wood dust	<input type="checkbox"/> Lead solder	<input type="checkbox"/> Cadmium
<input type="checkbox"/> Gasoline	<input type="checkbox"/> Cotton dust	<input type="checkbox"/> Welding fumes	<input type="checkbox"/> Other metals
<input type="checkbox"/> Asbestos	<input type="checkbox"/> Mineral or mining dust	<input type="checkbox"/> Electroplating fumes	<input type="checkbox"/> Pneumatic drills (vibrations)
<input type="checkbox"/> X-ray radiation	<input type="checkbox"/> Silica/sand dust	<input type="checkbox"/> Lead	<input type="checkbox"/> None of these

5. How many years did you have this job?

- ☐ 1 year or less
☐ 2–5 years
☐ 6–10 years
☐ 11–20 years
☐ At least 21 years

6. When did you usually work at this job?

- F Year round
- F Off season only

7. How much time did you work at this job?

- F Half-time or less
- F More than half-time

8. Did you mix or apply herbicides during military operations? (*For example: Agent Orange, Agent White*)

- F No
- F Yes
- F Never in the military

9. Are there other exposures not previously mentioned which you feel we should know about?

- F No
- F Yes (*Please describe these in the space below.*)

III. Work Practices - Occupational exposures

10. Were you applying pesticides 10 years ago?

☐ No [Complete Column A Only]

☐ Yes [Be sure to answer *both* for current work practices (Column A), and for 10 years ago (Column B).]



QUESTION	A. NOW (Past 12 Months)	B. 10 YEARS AGO
11. What types of pesticides do you generally mix or apply using protective equipment? (Mark all that apply.)	<input type="checkbox"/> Insecticides <input type="checkbox"/> Herbicides <input type="checkbox"/> Fungicides <input type="checkbox"/> Fumigants <input type="checkbox"/> None	<input type="checkbox"/> Insecticides <input type="checkbox"/> Herbicides <input type="checkbox"/> Fungicides <input type="checkbox"/> Fumigants <input type="checkbox"/> None
12. What types of protective equipment do you usually use when you personally handle pesticides? (Mark all that apply.)	<input type="checkbox"/> Never use protective equipment <input type="checkbox"/> Cartridge respirator, gas mask <input type="checkbox"/> Dust mask <input type="checkbox"/> Full face shield <input type="checkbox"/> Hat <input type="checkbox"/> Goggles <input type="checkbox"/> Chemically resistant gloves (like neoprene or nitrile gloves) <input type="checkbox"/> Fabric/leather gloves <input type="checkbox"/> Apron <input type="checkbox"/> Chemically resistant boots <input type="checkbox"/> Cloth coveralls (complete suit) <input type="checkbox"/> Disposable outer clothing (like Tyvek®)	<input type="checkbox"/> Never use protective equipment <input type="checkbox"/> Cartridge respirator, gas mask <input type="checkbox"/> Dust mask <input type="checkbox"/> Full face shield <input type="checkbox"/> Hat <input type="checkbox"/> Goggles <input type="checkbox"/> Chemically resistant gloves (like neoprene or nitrile gloves) <input type="checkbox"/> Fabric/leather gloves <input type="checkbox"/> Apron <input type="checkbox"/> Chemically resistant boots <input type="checkbox"/> Cloth coveralls (complete suit) <input type="checkbox"/> Disposable outer clothing (like Tyvek®)
13. After mixing or applying pesticides, when do you usually change into clean work clothes?	<input type="checkbox"/> Right away <input type="checkbox"/> At lunch <input type="checkbox"/> At the end of that work day <input type="checkbox"/> At the end of the next work day <input type="checkbox"/> Later in the week <input type="checkbox"/> Always use disposable outer clothing	<input type="checkbox"/> Right away <input type="checkbox"/> At lunch <input type="checkbox"/> At the end of that work day <input type="checkbox"/> At the end of the next work day <input type="checkbox"/> Later in the week <input type="checkbox"/> Always use disposable outer clothing
14. Do you usually wear regular (prescription) eye glasses or sunglasses while mixing or applying pesticides? (Does not include goggles.)	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
15. If you should spill a small amount of pesticide on your clothes early in the day, when would you usually change clothes?	<input type="checkbox"/> Right away <input type="checkbox"/> Change at lunch <input type="checkbox"/> At the end of that work day <input type="checkbox"/> At the end of the next work day <input type="checkbox"/> Later in the week <input type="checkbox"/> Always use disposable outer clothing	<input type="checkbox"/> Right away <input type="checkbox"/> Change at lunch <input type="checkbox"/> At the end of that work day <input type="checkbox"/> At the end of the next work day <input type="checkbox"/> Later in the week <input type="checkbox"/> Always use disposable outer clothing
16. When mixing or applying pesticides, how long do you usually work with the same pair of gloves before exchanging them for a new set?	<input type="checkbox"/> Don't wear gloves <input type="checkbox"/> Change each time <input type="checkbox"/> Change at least once per month <input type="checkbox"/> Change 1 to 4 times per season <input type="checkbox"/> Generally don't change gloves until they are worn out	<input type="checkbox"/> Don't wear gloves <input type="checkbox"/> Change each time <input type="checkbox"/> Change at least once per month <input type="checkbox"/> Change 1 to 4 times per season <input type="checkbox"/> Generally don't change gloves until they are worn out

QUESTION	A. NOW (Past 12 Months)	B. 10 YEARS AGO
17. In your household, how are clothes usually washed after they have been worn when mixing or applying pesticides?	<input type="checkbox"/> Always wear disposable clothing (like Tyvek®) <input type="checkbox"/> Mixed with family wash <input type="checkbox"/> Soaked separately, then mixed with family wash <input type="checkbox"/> Washed separately in family machine <input type="checkbox"/> Sent out or washed in a machine used only for this purpose	<input type="checkbox"/> Always wear disposable clothing (like Tyvek®) <input type="checkbox"/> Mixed with family wash <input type="checkbox"/> Soaked separately, then mixed with family wash <input type="checkbox"/> Washed separately in family machine <input type="checkbox"/> Sent out or washed in a machine used only for this purpose
18. When mixing or applying pesticides, what parts of your body usually come in contact with the pesticide? <i>(Mark all that apply.)</i>	<input type="checkbox"/> No parts of my body <input type="checkbox"/> Hands <input type="checkbox"/> Arms <input type="checkbox"/> Legs <input type="checkbox"/> Face <input type="checkbox"/> Body	<input type="checkbox"/> No parts of my body <input type="checkbox"/> Hands <input type="checkbox"/> Arms <input type="checkbox"/> Legs <input type="checkbox"/> Face <input type="checkbox"/> Body
19. If you finish mixing or applying pesticides in the morning, when do you usually wash yourself? <i>(Mark all that apply.)</i>	<input type="checkbox"/> Hands/arms only, right away <input type="checkbox"/> Complete bath/shower right away <input type="checkbox"/> Complete bath/shower at lunch <input type="checkbox"/> Hands/arms only, at end of day <input type="checkbox"/> Complete bath/shower at end of day <input type="checkbox"/> Other	<input type="checkbox"/> Hands/arms only, right away <input type="checkbox"/> Complete bath/shower right away <input type="checkbox"/> Complete bath/shower at lunch <input type="checkbox"/> Hands/arms only, at end of day <input type="checkbox"/> Complete bath/shower at end of day <input type="checkbox"/> Other
20. After <i>mixing or applying</i> pesticides, where do you usually wash up or shower?	<input type="checkbox"/> Bathroom in home <input type="checkbox"/> Outside shower <input type="checkbox"/> Other area outside home	<input type="checkbox"/> Bathroom in home <input type="checkbox"/> Outside shower <input type="checkbox"/> Other area outside home
21. Do you use an enclosed system, such as lock and load, for mixing and transferring pesticide concentrates?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know
22. How is the pesticide applying equipment generally washed at the end of the application? <i>(Mark all that apply.)</i>	<input type="checkbox"/> Don't wash <input type="checkbox"/> Clean nozzle <input type="checkbox"/> Rinse tank <input type="checkbox"/> Hose down sprayer <input type="checkbox"/> Hose down tractor	<input type="checkbox"/> Don't wash <input type="checkbox"/> Clean nozzle <input type="checkbox"/> Rinse tank <input type="checkbox"/> Hose down sprayer <input type="checkbox"/> Hose down tractor
23. Does the tractor you usually use for spraying pesticides have an enclosed cab?	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Don't use tractor	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Don't use tractor
24. Does the primary tractor you use during pesticide application have a cab with a charcoal filter?	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Primary tractor doesn't have cab	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Primary tractor doesn't have cab
25. Are agricultural or commercial pesticides ever stored (even temporarily) in your home? <i>(Mark all that apply.)</i>	<input type="checkbox"/> Yes, in home <input type="checkbox"/> Yes, in basement <input type="checkbox"/> Yes, in garage <input type="checkbox"/> Yes, in attached outbuilding or shed <input type="checkbox"/> No	<input type="checkbox"/> Yes, in home <input type="checkbox"/> Yes, in basement <input type="checkbox"/> Yes, in garage <input type="checkbox"/> Yes, in attached outbuilding or shed <input type="checkbox"/> No
26. Do YOU usually repair your own spraying or mixing equipment?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes

QUESTION	A. NOW (Past 12 Months)	B. 10 YEARS AGO
27. How far is your home from the nearest area where pesticides are <i>mixed</i> ?	F No pesticides mixed on farm F Less than 50 yards F 50–100 yards F More than 100 yards	F No pesticides mixed on farm F Less than 50 yards F 50–100 yards F More than 100 yards
28. How far is your home from the nearest field or orchard where pesticides are <i>applied</i> ?	F Less than 100 yards F 100–199 yards F 200–299 yards F 300 yards or more	F Less than 100 yards F 100–199 yards F 200–299 yards F 300 yards or more
29. How far is your <i>drinking water well</i> from the nearest area where pesticides are <i>mixed</i> ?	F No pesticides mixed on farm F Less 50 yards F 50–100 yards F More than 100 yards F Don't have private well	F No pesticides mixed on farm F Less 50 yards F 50–100 yards F More than 100 yards F Don't have private well